| | | | | | | | | Application or Docket Number | | | | |
|---|---|---|----------------|-------------------------------|--------------|------------------|-------|------------------------------|------------------------|-------|----------------|------------------------|
| | PATENT | | 09/788191 | | | | | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | MALL E | NTITY | OR | | THAN ENTITY |
| TOTAL CLAIMS | | | 35 | | | | | RATE | FEE |] | RATE | FEE |
| FOR | | | NUMBER FILED | | NUME | IBER EXTRA | | Basic Fe | E 355.00 | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | | 35 minus 20= • | | • 1 | 15 | | X\$ 9= | | ОЯ | X\$18= | 370 |
| INDEPENDENT CLAIMS | | | 3 minus 3 = * | | | | | X40= | | OR | X80= | |
| M | JLTIPLE DEPE | NDENT CLAIM P | RESENT | | | | | +135= | | OR | +270= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | L | TOTAL | | OR | TOTAL | 980 | |
| | CLAIMS AS AMENDED - PART II | | | | | | | | | | OTHER | THAN |
| _ | e versame | (Column 1) | | (Column 2) (Column 3) | | | SMALL | ENTITY | OR | SMALL | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | BER OUSLY | PRÉSENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | .35 | Minus | - 3 | 2 | - B | | X\$ 9= | | OR | X\$18- | |
| | independent | · 3 | Minus | · 3 | | - 9 | I | X40= | $\mathbb{L}V$ | OR | X80= | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | ' [| +135= | VC | OR | +270= | , |
| | | | | | | | L | TOTAL | • | | TOTAL | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | DDIT. FEE | | 3 | ADDIT. FEE | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIC PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | · / P | Miņus | 3 | 35 | · O | | X\$ 9= | | OR | X\$18= | _ |
| | Independent | · 3 | Minus | EPENDENT CLAIM | | - 0 | | X40= | V | OR | X80= | X |
| | PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | OR | +270= TOTAL | |
| | | | | | | | | TOTAL DOIT, FEE | | OR | ADDIT. FEE | |
| | | (Column 1) | | (Column 2) (Column 3 | | | _ | | | | | |
| AMENDMENT C | | REMAINING AFTER AMENDMENT | The same | PREVIO PAID I | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | • | | X\$ 9= | | OR | X\$18= | ï |
| | Independent | • | Minus | *** | | * | | X40= | | OR | X60= | |
| L | FIRST PRESENTATION OF MOCHIFICE DEPENDENT CLAIM | | | | | | | | | OR | +270= | |
| "If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "3." The "Highest Number Previously Paid For" (Intal or Independent is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |